Express Mail Mailing Label No.: EL 988705041 US

UTILITY PATENT APPLICATION TRANSMITTAL

 $\begin{array}{c} TRANSMITTAL \\ \text{(Only for new nonprovisional applications under 37 CFR 1.53(b))} \end{array}$

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Attorney Docket No.	SNS-015	48 T
First Named Inventor	Levene	0.5 75
Title	Apparatus and Methods for Texture Mapping	9/0

APPLICATION ELEMENTS	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. Fee Transmittal Form (w/ copy)	1110Aulidi III, 171 22515-1450
2. ☑ Small Entity Status ☑ Applicant claims small entity status ☐ Status established in prior application and is still proper and desired	ACCOMPANYING APPLICATION PARTS
 Specification and Drawings [Total Pages 86] Written Description - (47 pages) Claims - (10 pages) 	8. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney
Abstract - (1 page)Sheets of Drawings - (28 sheets)	9. English Translation Document (if applicable)
	10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
4. ☐ Oath or Declaration [Total Pages 3] a. ☐ Newly executed (original) b. ☐ Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)	11. Preliminary Amendment Drawings [Total Sheets]
[Note Box 5 below]	12. Return Receipt Postcard (specifically itemized)
5. Incorporation by Reference (usable if Box 4b is checked) The entire Disclosure of the prior application, from which a copy of the oath or declaration is supplied	13. Certified Copy of Priority Document(s) (if foreign priority claimed)
under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	14. Nonpublication Request Under 35 U.S.C. 122(b)
6. Application Data Sheet	15. CD in duplicate for large table or computer program
7. Nucleotide and/or Amino Acid Sequence Submission	16. Other:
Computer Readable Form (CRF)	• Check in the amount of \$979.00
Paper Copy (identical to computer copy)	Petition for Use of Color Drawings as Formal Drawings
CD (2 copies) (identical to computer copy)	Under 37 C.F.R. § 1.84(a)(2) (1 pg.)
Statement verifying identity of above copies	• Three extra sets of color drawings (3x10 = 30 pgs.)
	 One set of B&W photocopies of color drawings (10 pgs.)
17. If a CONTINUING APPLICATION: Amend the speci	
This is a	neation by inscrining on page 1, before the first line, the sentence:
continuation divisional continuation entire disclosure of which is incorporated by reference herein Priority to the above application(s) is claimed und Prior application information: Examiner:	n-in-part of prior application Serial No. / , filed on , , the ler 35 U.S.C. 120. Group/Art Unit:
18. Priority - 35 U.S.C. 119	
The certified copy has been filed in prior U.S	on in is claimed under 35 U.S.C. 119. application Serial No/ on
The certified copy will follow.	
CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator	Respectfully submitted,
Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100	Date: October 30, 2003 Reg. No.: 53,002 William R. Haulbrook, Ph.D. Attorney for Applicants Testa, Hurwitz & Thibeault, LLP High Street Tower
Customer No. 021323	125 High Street Boston, MA 02110

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FEE TRANSMITTAL FY 2004

	Complete if Known
Application Serial Number	Not yet assigned
Filing Date	Herewith
First Named Inventor	Levene
Group Art Unit	Not yet assigned
Examiner Name	Not yet assigned
Attorney Docket No.	SNS-015

None Payment Enclosed: Money Order Other Other Second
The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. Required Fees (copy of this sheet enclosed). Additional fee required under 37 CFR 1.16 and 1.17. Additional fee required under 37 CFR 1.16 and 1.17. Additional fee required under 37 CFR 1.16 and 1.17. Solutional fee fee fee fee fee fee fee fee fee fe
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or charge any fee indicated below for this submission to Deposit Account No. 20-0531. ☐ Required Fees (copy of this sheet enclosed). ☐ Additional fee required under 37 CFR 1.16 and 1.17. ☐ Overpayment Credit. 3. ☑ Applicant claims small entity status. FEE CALCULATION 1. FILING FEE Large Entity Fee (S) Fee Description Fee Paid Fee (S) Fee Description Fee Paid Foe (S) Fee Description Fee Paid Number Number Rate Amount Filed Extra Number Number Rate Amount Filed Extra Number Number Rate Amount Filed Extra Number Number Status Filed Extra Number Number Rate Amount Filed (S) 818.00 = \$756.00 Multiple Dependent Claims (s), if any \$290.00 = Claims Free(st) Betheviolated (S) 849.00 Multiple Dependent Claim(s), if any \$290.00 = Claims Free(st) Betheviolated (S) 849.00 Claims Provisors Claims Provisors SMALL ENTITY DISCOUNT: \$1,890.00 SMALL ENTITY DISCOUNT: \$1,990.00 = Claims Free(st) Paid For TOTAL (S) 979.00 Total Claims Highest No. Present Extra Total Claims Provisors SMALL ENTITY DISCOUNT: \$1,990.00 = Claims Statemation of Multiple Dependent Claim(s), if any \$290.00 = Claims Provisors SMALL ENTITY DISCOUNT: \$1,990.00 = Claims Statemation of Multiple Dependent Claim (S) Files Provisors (S) SUBTOTAL (3) \$1,000 = SUBTOTAL (4) \$1,000 = SUBTOTAL (5) \$1,000 = SUBTOTAL (6) \$1,000 = SUBTOTAL (7) \$1,000 = SU
to Deposit Account No. 20-0531.
Required Fees (copy of this sheet enclosed). 30 Additional fee required under 37 CFR 1.6 and 1.17. 30 Overpayment Credit. 3. Applicant claims small entity status. 2,520 2,520 Request for expate reexamination
Additional fee required under 37 CFR 1.16 and 1.17
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1.17.
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Total Claims S S S S S S S S S
1. FILING FEE
Color Colo
Large Entity Fee (\$) Fee Description Fee Paid 1480 740 Extension for reply within third month
Total Claims S -3 -2 x \$ 86.00 \$ 170.00 \$ 1.00 \$
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2010 1005 Extension for reply within fifth month
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340 Design filling fee
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Number Number Number Rate Amount Filed Extra
Number Number Rate Amount Filed Extra Extra Statement Total Claims 62 -20 = 42 x \$ 18.00 = \$756.00 Total Claims 62 -20 = 42 x \$ 18.00 = \$756.00 Independent Claims 5 -3 = 2 x \$ 86.00 = \$172.00 Multiple Dependent Claim(s), if any \$290.00 = Total Entirty DISCOUNT: \$849.00 SWALL ENTITY DISCOUNT: \$849.00 Remaining Previously Extra After Amend. Paid For Total - = x \$ 18.00 = Indep. - = x \$ 86.00 = Inde
Total Claims 62 -20 42 x \$ 18.00 \$ 756.00
Total Claims 62 -20 42 x \$ 18.00 \$ 756.00 770 385 For each additional invention to be examined (37 CFR 1.129(a)) 100 100 Certificate of Correction for applicant's error 110 55 Submission of Terminal Disclaimer
Total Claims 62 - 20 = 42 x \$ 18.00 = \$756.00 Independent Claims 5 - 3 = 2 x \$ 86.00 = \$172.00 Multiple Dependent Claim(s), if any \$290.00 =
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TOTAL: \$ 1,698.00 SMALL ENTITY DISCOUNT: \$ 849.00
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SMALL ENTITY DISCOUNT: \$ \$49.00
SUBTOTAL (1) (\$) 849.00
2. AMENDMENT CLAIM FEES Claims Highest No. Present Rate Fee Paid Remaining Previously Extra After Amend. Paid For Total - = x \$ 18.00 = SUBTOTAL (1) \$ 849.00 Indep = x \$ 86.00 = SUBTOTAL (2) First Presentation of Multiple Dep. + \$290.00 = Claim TOTAL: (\$) SMALL ENTITY DISCOUNT: (\$) SUBTOTAL (2) (\$) 0 TOTAL (\$) 979.00
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After Amend. Paid For Total - = x \$ 18.00 = SUBTOTAL (1) \$ 849.00 Indep = x \$ 86.00 = SUBTOTAL (2) 0 First Presentation of Multiple Dep. + \$290.00 = SUBTOTAL (3) \$ 130.00 Claim TOTAL: (\$) SMALL ENTITY DISCOUNT: (\$) SUBTOTAL (2) (\$) 0 TOTAL (\$) 979.00
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First Presentation of Multiple Dep.
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SMALL ENTITY DISCOUNT: (\$) SUBTOTAL (2) (\$) 0 TOTAL (\$) 979.00
SUBTOTAL (2) (\$) 0 TOTAL (\$) 979.00
CORRESPONDENCE ADDRESS SIGNATURE BLOCK
Patent Administrator
Testa, Hurwitz & Thibeault, LLP Date: October 30, 2003
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